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No. 3109 P. 1



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TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Fax: 571-273-8300

FROM: Gael D. Lindland
(Registration # 51,952)

Tel: 734-741-6122

DATE: September 2, 2005

**No. of Pages (including
cover page):** 6

Subject: Application #: 10/627,660 filed 7/28/2003
Title: Centrifugal Blood Pump
Examiner: Gerald A. Michalsky
Art Unit: 3753

Enclosed please find the following:

1. Transmittal Form (PTO/SB/21);
2. Amendment dated 9/2/2005; and
3. Supplemental Reissue Declaration under 37 C.F.R. § 1.175.

Thank you.

A handwritten signature in black ink, appearing to read 'GDL', followed by a long, horizontal, oval-shaped flourish.

Gael Diane Lindland, Esq.
(Registration # 51952)

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No. 3109 P. 2

PTO/SB/21 (09-04)


Approved for use through 07/31/2006. OMB 0851-0031

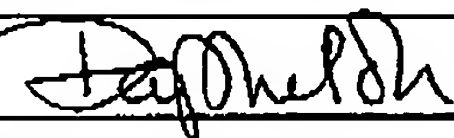
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/627,660
	Filing Date	JULY 28, 2003
	First Named Inventor	EARL W. CLAUSEN
	Art Unit	3753
	Examiner Name	MICALSKY, GERALD A.
Total Number of Pages in This Submission	Attorney Docket Number	032722-571(0091REJ-US)

ENCLOSURES <i>(Check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	TERUMO CARDIOVASCULAR SYSTEMS CORP.		
Signature			
Printed name	GAEL DIANE LINDLAND		
Date	SEPTEMBER 2, 2005	Reg. No.	51952

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	DAPHNE POH	Date	SEPTEMBER 2, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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No. 3109 P. 3

Reissue Application #: 10/627,660 filed 7/28/2003
Attorney Docket #: 032722-571(0091REI-US)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Clausen et al) Art Unit: 3753
Application No.: 10/627,660) Examiner: Gerald A. Michalsky
Filed: 07/28/2003)
For: CENTRIFUGAL BLOOD PUMP)

AMENDMENT


Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir,

In response to the Office Action dated June 10, 2005, Applicant respectfully submits a duly executed Supplemental Reissue Declaration correcting all the deficiencies stated by the Examiner in the abovementioned Office Action.

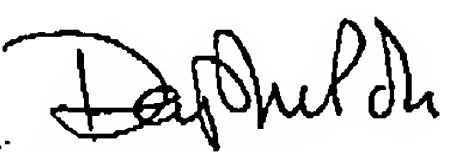
Respectfully submitted,

Date: 9/2/05


Gael Diane Lindland
Registration #: 51952

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile (fax #: 571-273-8300) transmitted to Mail Stop Amendment, Commissioner for Patents, U.S. Patent & Trademark Office, Alexandria, VA 22313-1450 on the date shown below:

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Daphne Poh

Date: 9/2/05